SENATE BILL REPORT SB 6183

As Reported By Senate Committee On: Health & Long-Term Care, January 19, 2006 Ways & Means, February 6, 2006

Title: An act relating to hepatitis C.

Brief Description: Creating provisions relating to the hepatitis C virus.

Sponsors: Senator Kastama.

Brief History:

Committee Activity: Health & Long-Term Care: 1/11/06, 1/19/06 [DPS-WM].

Ways & Means: 1/31/06, 2/6/06 [DP2S].

SENATE COMMITTEE ON HEALTH & LONG-TERM CARE

Majority Report: That Substitute Senate Bill No. 6183 be substituted therefor, and the substitute bill do pass and be referred to Committee on Ways & Means.

Signed by Senators Keiser, Chair; Thibaudeau, Vice Chair; Deccio, Ranking Minority Member; Benson, Brandland, Franklin, Kastama, Kline, Parlette and Poulsen.

Staff: Edith Rice (786-7444)

SENATE COMMITTEE ON WAYS & MEANS

Majority Report: That Second Substitute Senate Bill No. 6183 be substituted therefor, and the second substitute bill do pass.

Signed by Senators Prentice, Chair; Fraser, Vice Chair, Capital Budget Chair; Doumit, Vice Chair, Operating Budget; Zarelli, Ranking Minority Member; Brandland, Fairley, Kohl-Welles, Parlette, Pflug, Pridemore, Rasmussen, Regala, Roach, Rockefeller, Schoesler and Thibaudeau.

Staff: Tim Yowell (786-7435)

Background: Substitute Senate Bill 5039 was enacted in May 2003, and mandated that the Secretary of Health create a state plan for the education, prevention, and management of the hepatitis C virus in Washington State. The Washington State Hepatitis C Strategic Plan was presented in January, 2004. However, state funds were not appropriated for the development or implementation of the plan.

Hepatitis C is the most common blood-borne infection in the United States, infecting approximately 3.9 million individuals. There is no vaccine nor known cure for it. It can lead to cirrhosis of the liver and liver cancer. It is a common cause of chronic liver disease and is the most frequent reason in the U.S. for a liver transplant. Very little accurate information is

Senate Bill Report - 1 - SB 6183

available about hepatitis C in Washington State. It is believed that as many as 100,000 Washington State residents may be infected with hepatitis C.

Summary of Second Substitute Bill: The Department of Health (DOH) is directed to establish and maintain a statewide database record of reported cases of hepatitis C. Information is to be used only for statistical, scientific, medical research, and public health purposes. The DOH will ensure that access to database information is consistent with federal and state laws which relate to release of records for research. Providers are not liable for breach of confidentiality by submitting information to DOH for this registry.

The DOH must implement a public awareness and education campaign which includes information on risk factors, prevention activities, early detection, prevention of chronic liver disease, transmission, and treatment options. Emphasis is to be placed upon educating health care providers and the general public.

Second Substitute Bill Compared to Substitute Bill: The second substitute bill drops the requirement that health care facilities, clinical laboratories, physicians, and other health care providers who diagnose or treat any patient with hepatitis C to notify the DOH of the patient for inclusion on the database. The second substitute bill is not null and void if not specifically funded.

Substitute Bill Compared to Original Bill: Reference to a registry is replaced with a database. The State Board of Health will adopt rules for implementation instead of the Department of Health, and the public awareness campaign is aimed at the public and health care providers instead of specific high risk groups.

Appropriation: None.

Fiscal Note: Available.

Committee/Commission/Task Force Created: No.

Effective Date: Ninety days after adjournment of session in which bill is passed.

Testimony For (Health & Long-Term Care): More people die of hepatitis C than die of AIDS. Hepatitis C has been declared an epidemic by the Surgeon General. Early detection is critical. Health care providers don't really understand the extent of the problem and further stigmatize those who have contracted it. Emphasis should be placed on educating health care providers and the general public. Although it can be contracted through IV drug use, many sufferers contracted it through blood transfusions done before blood supplies were screened for it. It can sometimes take many years before an individual displays symptoms of hepatitis C, so it is possible to have it for a long time without being aware that you are infected. This places many people at risk. There are currently no data links between VA, DOC, DOH, and other facilities which enable them to share data about infection.

Testimony Against (Health & Long-Term Care): None.

Who Testified (Health & Long-Term Care): PRO: Senator Jim Kastama, Kitty Candelaria, National Hepatitis Institute; Tom Wagner, Sheila Wagner, Robert Lipp, Roberta Lipp, Steve Summerday, Michelle Lucas, Mary McColm, Charles Youngquist, Keith Harris,

Robert Raftery, Gary Sunds, Christine Stearns, Jeffrey Robinson, Patty Hayes, Department of Health; Wendy Dillon, Department of Health.

Testimony For (Ways & Means): The U.S. Surgeon General has declared Hepatitis C an epidemic. There are more deaths from Hepatitis C in Washington than from AIDS. Yet most of the public knows very little about how the disease can be prevented, transmitted, or treated. A comprehensive public information campaign would change that. Establishing a database would enable the Department of Health to identify and target areas of the state with a high incidence of the disease.

Testimony Against (Ways & Means): None.

Who Testified (Ways & Means): PRO: Senator Jim Kastama, prime sponsor.

Senate Bill Report - 3 - SB 6183